ILLINOIS DEPARTMENT OF AGRICULTURE THOROUGHBRED BREEDERS FUND PROGRAM

STALLION RENEWAL FOR 2021

INSTRUCTIONS FOR PREPARING AND SUBMITTING A THOROUGHBRED RENEWAL STALLION APPLICATION FOR LICENSE UNDER THE HORSE RACING ACT OF 1975

To renew the license of your stallion with the Illinois Department of Agriculture Thoroughbred Breeders Fund Program for the 2020 breeding season, it will be necessary for you to follow these instructions:

- 1. Complete the enclosed Application for Stallion Certification. Please review the preprinted information for its correctness, make any necessary corrections, sign the back page of the application and if you wish list your stallion's 2020 fee which is printed in the Department's "Illinois General Stallion Listing."
- 2. If the stallion is leased, the lessee must also sign the application. The renewal application will not be accepted without the signature of the stallion owner and the lessee if applicable.
- 3. Complete the STATEMENT OF OWNERSHIP.
- 4. Return both pages <u>by December 31, 2020</u>. Renewal applications not submitted by that date shall be subject to monetary penalties.

Per the Illinois Horse Racing Act of 1975. The late filing penalty for the late filing of a Renewal Application for Stallion Certification (Due before January 1st) is as follows:

| 1 - 30 days late | | \$ 50.00 |
|------------------------|------|----------|
| 31 - 45 days late | | \$150.00 |
| more than 45 days late | | \$250.00 |

IF THERE HAS BEEN ANY CHANGE IN THE OWNERSHIP OF THIS STALLION, YOU MUST CONTACT THIS OFFICE IMMEDIATELY.

IF OWNERSHIP WILL CHANGE FOR 2021 CONTACT THE DEPARTMENT OF AGRICULTURE. ADDITIONAL INFORMATION IS REQUIRED ALONG WITH THE APPLICATION.

RETURN THIS FORM TO:

ILLINOIS DEPARTMENT OF AGRICULTURE BUREAU OF COUNTY FAIRS & HORSE RACING P.O. BOX 19281 ◆ SPRINGFIELD, ILLINOIS 62794-9281 217/557-4606 ◆ Fax: 217/524-6194

Carrie.Tisckos@illinois.gov

www2.illinois.gov/sites/agr/Animals/HorseRacing/Pages/default.aspx

(Street address 801 E. Sangamon Avenue, Springfield, IL 62702)



ILLINOIS THOROUGHBRED BREEDERS FUND PROGRAM APPLICATION FOR STALLION CERTIFICATION FOR THE ILLINOIS CONCEIVED AND FOALED PROGRAM

2021

Owner:

• RENEWAL APPLICATIONS MUST BE SUBMITTED <u>PRIOR</u> TO JANUARY 1 OF THE LICENSE YEAR.

| NAME OF STALLION: | | JOCI | KEY CLUB #: |
|------------------------------|-------------------------------|-------------------------------|--|
| SIRE: | DAM: | YR. | OF FOALING: |
| Renewal, Complete and Submit | All Items Below: (Type or Pri | | nip or When Applying for Stallion in Ink.) |
| OWNER(s) AND MAILING A Name: | ADDRESS: | | |
| | | | |
| | | | Zip: |
| Felephone: | | <u>.</u> | |
| LESSEE(s) AND MAILING | | | |
| | | | |
| | | | |
| • | | | Zip: |
| retepnone: | | <u>.</u> | |
| THIS STALLION STOOD FO | OR SERVICE DURING 2020 | AT: | |
| Name: | | | <u>.</u> |
| Address: | | | <u>.</u> |
| City: | | State: | Zip: |
| Telephone: | | <u>.</u> | |
| | | | |
| THIS STALLION WILL STA | AND FOR SERVICE DURING | G 2021 AT: (If the san | ne as 2020, check box |
| Name: | | | <u>.</u> |
| Address: | | | <u>.</u> |
| | | | Zip: |
| Telephone: | | • | |

(APPLICATION FOR STALLION CERTIFICATION)

NEW AND RENEWAL CERTIFICATION RULES: (IL Admin. Code Ch. 1, Sec. 290.155 & 160)

I Understand - In order for a stallion's foal to be registered as Illinois conceived and foaled, any person who desires to stand the stallion for service shall, before standing or offering the stallion for service, certify the stallion with the Department.

I Understand - That the stallion will be standing for service within the State of Illinois and will not stand for service at any place outside the State of Illinois during the calendar year in which the foal is conceived.

I Understand - In order for a stallion's foal to be registered as Illinois Conceived and Foaled, a person offering or standing the stallion for service shall maintain a complete breeding record and a report submitted to the Department by September 1 of each year, showing all mares bred, each mare's Jockey Club registration number, first and last breeding dates and the name and address of the owner(s).

NOTIFICATION OF DESIRE TO MOVE STALLION: (IL Admin. Code Ch. 1, Sec. 290.175)

I Understand -The owners or their authorized representative must notify the Department <u>prior</u> to the stallion leaving the location where he is certified.

NOTIFICATION OF SALE OR TRANSFER OF OWNERSHIP OF STALLION: (IL Admin. Code Ch. 1, Sec. 290.177)

I Understand - The Department must receive notification of transfer of ownership of a certified stallion within 10 days after the sale or transfer.

I Understand - In order for new owners to have a foal registered as Illinois conceived and foaled, they must certify the stallion, before standing or offering the stallion for service, with the Department.

I Understand - The stallion may not be used for breeding purposes outside the State of Illinois during the remainder of the calendar year for which the stallion was certified as an Illinois stallion.

I UNDERSTAND THAT ANY VIOLATION OF THESE STALLION CERTIFICATION REQUIREMENTS OR DEPARTMENT OF AGRICULTURE STALLION REGULATIONS MAY RESULT IN DISQUALIFICATION FROM THE ILLINOIS THOROUGHBRED BREEDERS FUND CONCEIVED AND FOALED PROGRAM OF ANY FOALS SIRED BY THIS STALLION DURING THE YEAR FOR WHICH LICENSED.

| SIGNATURE OF OWNER: _ | <u>.</u> |
|-----------------------|--|
| SIGNATURE OF LESSEE: | |
| _ | (Both signatures required when the Stallion is leased) |

The fee for your stallion is being sought for the "Illinois Department of Agriculture Stallion Listing." If you wish this information to be included, please list this fee below:

| Fee: | | |
|-------|--|--|
| I CC. | | |

RETURN THIS FORM TO:

ILLINOIS DEPARTMENT OF AGRICULTURE BUREAU OF COUNTY FAIRS & HORSE RACING P.O. BOX 19281 ◆ SPRINGFIELD, ILLINOIS 62794-9281

217/557-4606 ♦ Fax: 217/524-6194

Carrie.Tisckos@illinois.gov ◆ www2.illinois.gov/sites/agr/Animals/HorseRacing/

Pages



Bureau of County Fairs & Horse Racing P.O. Box 19281 ◆ Springfield, IL 62794-9281 217/782-4231 ◆ Fax 217/524-6194

THOROUGHBRED STATEMENT OF OWNERSHIP

| OWNER(S) NAME(S) A | ND ADDRESS(ES): | | PERCENTA OWN |
|-------------------------------------|-----------------------------------|--|---------------------------|
| Name | | | |
| Address | City | State & Zip Code | |
| Name | | | |
| Address | City | State & Zip Code | |
| Name | | | |
| Address | City | State & Zip Code | |
| Name | | | |
| Address | City | State & Zip Code | |
| Name | | | |
| Address | City | State & Zip Code | |
| Name | | | |
| Address | City | State & Zip Code | |
| Name | | | |
| Address | City | State & Zip Code | |
| ertify that this information is tru | ue and correct and that the above | e stallion meets all of the requirements for | or Illinois registration. |